

**PRESCRIPTION BLANK**

ADDRESS: NANCY A. BERMAN, M.D.  
1000 225 0000  
BATCH # 001-2002-001-001

PATIENT: *Michael, Gary* DATE: *1/8/02*

ADDRESS: \_\_\_\_\_

**Rx**

*Out of stock  
until 4/15/02*

SUBSTITUTION PERMISSIBLE DO NOT SUBSTITUTE

DO NOT REFILL REFILL TIMES

SIGNATURE OF PRESCRIBER: *Dea m*

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EXHIBIT 5

EXHIBIT

*D-14*  
*3-10-05* *fern*